

EXHIBIT H

Form 1120

U.S. Corporation Income Tax Return

OMB No. 1845-0123

2001

Department of the Treasury
Internal Revenue ServiceFor calendar year 2001 or tax year beginning _____, ending _____.
► Instructions are separate. See page 20 for Paperwork Reduction Act Notice.

A Check if a:	Name	B Employer identification number		
1 Consolidated return <input type="checkbox"/>	ULTIMATE MOTROLLER CORPORATION	95-4609867		
2 Personal holding co. (attach Sch. PH) <input type="checkbox"/>	Number, street, and room or suite no. (If a P. O. box, see page 7.) 373 W. PALMER AVENUE, #A	C Date incorporated 1/1/1997		
3 Personal service corp. (see instructions) <input type="checkbox"/>	City or town GLENDALE	State CA	ZIP code 91311	D Total assets (see page 8 of instructions)

E Check applicable boxes: (1) Initial return (2) Final return (3) Name change (4) Address change \$ 89,523

1a	Gross receipts or sales 308,100	b Less returns	c Balance ►	1c 308,100
2	Cost of goods sold (Schedule A, line 8)			2 172,897
3	Gross profit. Subtract line 2 from line 1c			3 135,203
4	Dividends (Schedule C, line 19)			4
5	Interest			5
6	Gross rents			6
7	Gross royalties			7
8	Capital gain net income (attach Schedule D (Form 1120))			8
9	Net gain or (loss) from Form 4797, Part II, line 18 (attach Form 4797)			9
10	Other income (see page 8 of instructions - attach schedule)			10
11	Total income. Add lines 3 through 10		►	11 135,203
12	Compensation of officers (Schedule E, line 4)			12
13	Salaries and wages (less employment credits)			13
14	Repairs and maintenance			14 235
15	Bad debts			15
16	Rents			16 12,825
17	Taxes and licenses			17 800
18	Interest			18 6,160
19	Charitable contributions (see page 10 of Instructions for 10% limitation)			19
20	Depreciation (attach Form 4562)	20 23,135	►	20 23,135
21	Less depreciation claimed on Schedule A and elsewhere on return	21a	►	21b 23,135
22	Depletion			22
23	Advertising			23
24	Pension, profit-sharing, etc., plans			24
25	Employee benefit programs			25
26	Other deductions (attach schedule)			26 379,834
27	Total deductions. Add lines 12 through 26		►	27 422,989
28	Taxable income before NOL deduction and special deductions. Subtract line 27 from line 11			28 -287,786
29	Less: a Net operating loss (NOL) deduction (see page 13 of Instructions) b Special deductions (Schedule C, line 20)	29a 703,540	►	29b 29c 703,540 703,540
30	Taxable income. Subtract line 29c from line 28			30 -891,326
31	Total tax (Schedule J, line 11)			31
32	Payments: a 2000 overpayment credited to 2001 b 2001 estimated tax payments c Less 2001 refund applied for on Form 4468 d Tax deposited with Form 7004 e Credit for tax paid on undistributed capital gains (attach Form 2439) f Credit for Federal tax on fuels (attach Form 4136). See Instructions	32a 32b 32c 32d 32e 32f 32g	►	32h 32h 32h
33	Estimated tax penalty (see page 14 of instructions). Check if Form 2220 is attached			33
34	Tax due. If line 32h is smaller than the total of lines 31 and 33, enter amount owed			34
35	Overpayment. If line 32h is larger than the total of lines 31 and 33, enter amount overpaid			35
36	Enter amount of line 35 you want: Credited to 2002 estimated tax		►	36 Refunded

TAXPAYER'S COPY

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date

PRESIDENT
TitleMay the IRS discuss this return
with the preparer shown below (see
instructions)? Yes No

Paid Preparer's Use Only	Preparer's signature ►	Date 9/11/2002	Check if self-employed <input checked="" type="checkbox"/>	Preparer's SSN or PTIN [REDACTED]
Firm's name (or yours) and address	ACE BUSINESS SERVICES 14422 VICTORY BLVD. VAN NUYS			EIN 95-3896700 Phone no. (818)994-7365 ZIP code 91401
		State CA		

(HTA)

Form 1120 (2001)

Schedule A Cost of Goods Sold

(See page 14 of Instructions.)

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	172,897
6	Total. Add lines 1 through 5	6	172,897
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on line 2, page 1	8	172,897

9a Check all methods used for valuing closing inventory:(i) Cost as described in Regulations section 1.471-3(ii) Lower of cost or market as described in Regulations section 1.471-4(iii) Other (Specify method used and attach explanation.) ►**b** Check if there was a writedown of subnormal goods as described in Regulations section 1.471-2(c) ► **c** Check if the LIFO Inventory method was adopted this tax year for any goods (If checked, attach Form 970) ► **d** If the LIFO Inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO ► 8d**e** If property is produced or acquired for resale, do the rules of section 263A apply to the corporation? Yes No**f** Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation Yes No**Schedule C Dividends and Special Deductions**

(See page 15 of Instructions.)

	(a) Dividends received	(b) %	(c) Special deductions (d) x (b)
1	Dividends from less-than-20%-owned domestic corporations that are subject to the 70% deduction (other than debt-financed stock)	70%	
2	Dividends from 20%-or-more-owned domestic corporations that are subject to the 80% deduction (other than debt-financed stock)	80%	
3	Dividends on debt-financed stock of domestic and foreign corporations (section 246A)	see instruct.	
4	Dividends on certain preferred stock of less-than-20%-owned public utilities	42%	
5	Dividends on certain preferred stock of 20%-or-more-owned public utilities	48%	
6	Dividends from less-than-20%-owned foreign corporations and certain FSCs that are subject to the 70% deduction	70%	
7	Dividends from 20%-or-more-owned foreign corporations and certain FSCs that are subject to the 80% deduction	80%	
8	Dividends from wholly owned foreign subsidiaries subject to the 100% deduction (section 245(b))	100%	
9	Total. Add lines 1 through 8. See page 16 of instructions for limitation		
10	Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958	100%	
11	Dividends from certain FSCs that are subject to the 100% deduction (section 245(c)(1))	100%	
12	Dividends from affiliated group members subject to the 100% deduction (section 243(a)(3))	100%	
13	Other dividends from foreign corporations not included on lines 3, 6, 7, 8, or 11		
14	Income from controlled foreign corporations under subpart F (attach Form(s) 5471)		
15	Foreign dividend gross-up (section 78)		
16	IC-DISC and former DISC dividends not included on lines 1, 2, or 3 (section 246(d))		
17	Other dividends		
18	Deduction for dividends paid on certain preferred stock of public utilities		
19	Total dividends. Add lines 1 through 17. Enter here and on line 4, page 1		
20	Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on line 29b, page 1		

Schedule E Compensation of Officers

(See Instructions for line 12, page 1.)

Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1, Form 1120) are \$500,000 or more.

(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of corporation stock owned		(f) Amount of compensation
			(d) Common	(e) Preferred	
1					
2	Total compensation of officers				
3	Compensation of officers claimed on Schedule A and elsewhere on return				
4	Subtract line 3 from line 2. Enter the result here and on line 12, page 1				

Schedule J Tax Computation

(See page 16 of instructions.)

- 1 Check if the corporation is a member of a controlled group (see sections 1561 and 1563) ►
- Important: Members of a controlled group, see instructions on page 16.
- 2a If the box on line 1 is checked, enter the corporation's share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
- | | | |
|-----------------------------|-----------------------------|-----------------------------|
| (1) <input type="text"/> \$ | (2) <input type="text"/> \$ | (3) <input type="text"/> \$ |
|-----------------------------|-----------------------------|-----------------------------|
- b Enter the corporation's share of: (1) Additional 5% tax (not more than \$11,750) \$
 (2) Additional 3% tax (not more than \$100,000) \$
- 3 Income tax. Check if a qualified personal service corporation under section 448(d)(2) ►
- 4 Alternative minimum tax (attach Form 4626)
- 5 Add lines 3 and 4
- 6a Foreign tax credit (attach Form 1118)
- b Possessions tax credit (attach Form 5735)
- c Check: Nonconventional source fuel credit QEV credit (attach Form 8834)
- d General business credit. Check box(es) and indicate which forms are attached:
 Form 3800 Form(s) (specify) ►
 Credit for prior year minimum tax (attach Form 8827)
 Qualified zone academy bond credit (attach Form 8860)
- 7 Total credits. Add lines 6a through 6f
- 8 Subtract line 7 from line 5
- 9 Personal holding company tax (attach Schedule PH (Form 1120))
- 10 Other taxes. Check if from: Form 4255 Form 8611 Form 8697
 Form 8866 Other (attach schedule)

11 Total tax. Add lines 8 through 10. Enter here and on line 31, page 1

Schedule K Other Information

(See page 19 of instructions.)

- 1 Check method of accounting: a Cash
 b Accrual c Other (specify) _____
- 2 See page 21 of the instructions and enter the:
 a Business activity code no. 335310
 b Business activity MANUFACTURER
 c Product or service CONTROLLER & M
- 3 At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 287(c).)
 If "Yes," attach a schedule showing: (a) name and employer identification number (EIN), (b) percentage owned, and (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.
- 4 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?
 If "Yes," enter name and EIN of the parent corporation _____
- 5 At the end of the tax year, did any individual, partnership, corporation, estate, or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 287(c).)
 If "Yes," attach a schedule showing name and identifying number. (Do not include any information already entered in 4 above.) Enter percentage owned _____
- 6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316.)
 If "Yes," file Form 5452, Corporate Report of Nondividend Distributions.

Yes	No	Yes	No
		If this is a consolidated return, answer here for the parent corporation and on Form 851, Affiliations Schedule, for each subsidiary.	
	X		
		7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of stock of the corporation entitled to vote or (b) the total value of all classes of stock of the corporation? If "Yes," enter: (a) Percentage owned and (b) Owner's country	X
		c The corporation may have to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter number of Forms 5472 attached	
		8 Check this box if the corporation issued publicly offered debt instruments with original issue discount. <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.	
	X	9 Enter the amount of tax-exempt interest received or accrued during the tax year \$ _____	
		10 Enter the number of shareholders at the end of the tax year (if 75 or fewer) 11	
	X	11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here <input type="checkbox"/> If the corporation is filing a consolidated return, the statement required by Regulations section 1.1502-21(b)(3)(i) or (ii) must be attached or the election will not be valid.	
		12 Enter the available NOL carryover from prior tax years (Do not reduce it by any deduction on line 29e.) \$ _____	

Note: If the corporation, at any time during the tax year, had assets or operated a business in a foreign country or U.S. possession, it may be required to attach Schedule N (Form 1120), Foreign Operations of U.S. Corporations, to this return. See Schedule N for details.

Schedule L Balance Sheets per Books		Beginning of tax year	End of tax year		
		(a)	(b)	(c)	(d)
Assets					
1 Cash			8,967		2,604
2a Trade notes and accounts receivable					
b Less allowance for bad debts					
3 Inventories					
4 U. S. government obligations					
5 Tax-exempt securities (see instructions)					
6 Other current assets (attach schedule)					
7 Loans to shareholders					
8 Mortgage and real estate loans					
9 Other investments (attach schedule)					
10a Buildings and other depreciable assets		163,968		163,968	
b Less accumulated depreciation		57,014	106,954	80,149	83,819
11a Depletable assets					
b Less accumulated depletion					
12 Land (net of any amortization)					
13a Intangible assets (amortizable only)		1,000		3,000	
b Less accumulated amortization		800	200	1,000	2,000
14 Other assets (attach schedule)				1,100	1,100
15 Total assets			117,221		89,523
Liabilities and Shareholders' Equity					
16 Accounts payable					
17 Mortgages, notes, bonds payable in less than 1 year					
18 Other current liabilities (attach schedule)			58,565		
19 Loans from shareholders			519,642		117,547
20 Mortgages, notes, bonds payable in 1 year or more					
21 Other liabilities (attach schedule)			240,000		540,748
22 Capital stock: a Preferred stock		2,500	2,500	422,500	422,500
b Common stock					
23 Additional paid-in capital					
24 Retained earnings - Appropriated (attach schedule)					
25 Retained earnings - Unappropriated			-703,486		-991,272
26 Adjustments to shareholders' equity (attach schedule)					
27 Less cost of treasury stock					
28 Total liabilities and shareholders' equity			117,221		89,523

Note: The corporation is not required to complete Schedules M-1 and M-2 if the total assets on line 15, col. (d) of Schedule L are less than \$25,000.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return

1 Net income (loss) per books	-287,786	7 Income recorded on books this year not included on this return (itemize):	
2 Federal income tax per books		Tax-exempt interest \$	
3 Excess of capital losses over capital gains			
4 Income subject to tax not recorded on books this year (itemize):			
5 Expenses recorded on books this year not deducted on this return (itemize):		8 Deductions on this return not charged against book income this year (itemize):	
a Depreciation \$		a Depreciation \$	
b Charitable contributions \$		b Charitable contributions \$	
c Travel and entertainment \$			
6 Add lines 1 through 5	-287,786	9 Add lines 7 and 8	
		10 Income (line 28, page 1)-line 6 less line 8	-287,786

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	-703,486	5 Distributions: a Cash	
2 Net income (loss) per books	-287,786	b Stock	
3 Other increases (itemize):		c Property	
.....		6 Other decreases (itemize):	
4 Add lines 1, 2, and 3	-991,272	7 Add lines 5 and 6	
		8 Balance at end of year (line 4 less line 7)	-991,272

TAXABLE YEAR

California Corporation

2001 Franchise or Income Tax Return

FORM

100

(NOT TO BE USED BY WATER'S-EDGE ELECTORS)

For calendar year 2001 or fiscal year beginning month _____ day _____ year 2001, and ending month _____ day _____ year _____				
California corporation number	Federal employer identification number (FEIN)			
1793793	95-4609867			
Corporation name				
ULTIMATE MOTROLLER CORPORATION				
Address	PMB no.			
373 W. PALMER AVENUE, #A				
City	State	ZIP Code		
GLENDALE	CA	91311		
A Final return? <input checked="" type="checkbox"/> Dissolved <input type="checkbox"/> Surrendered (Withdrawn) <input type="checkbox"/> Merged/Rerorganized <input type="checkbox"/> IRC Section 338 sale <input type="checkbox"/> QSub election. Enter date _____ B Is income included in a combined report of a unitary group? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, indicate: <input type="checkbox"/> wholly within CA (R&TC 25101.15) <input type="checkbox"/> within and outside of CA C If the corp. filed on a water's-edge basis pursuant to R&TC Sections 25110 and 25111 In previous years, enter the date the water's-edge election ended Was the corporation's income included in a consolidated federal return? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Questions continued on Side 2
State Adjustments	1 Net income (loss) before state adjustments. See instructions	• 1	-287,786	
	2 Amount deducted for foreign or domestic tax based on income or profits	• 2		
	3 Amount deducted for tax under the provisions of the Bank and Corporation Tax Law	• 3		
	4 Interest on government obligations	• 4		
	5 Net California capital gain from Schedule D, line 11	• 5		
	6 Depreciation and amortization in excess of amount allowed under California law. Attach form FTB 3885	• 6	23,335	
	7 Net income of corporations not included in federal consolidated return. See instructions	• 7		
	8 Other additions. Attach schedule(s)	• 8		
	9 Total. Add line 1 through line 8	• 9	-264,451	
	10 Intercompany dividend deduction. Attach Schedule H (100)	• 10		
	11 Other dividend deduction. Attach Schedule H (100)	• 11		
	12 Additional depreciation allowed under CA law. Attach form FTB 3885	• 12		
	13 Capital gain from federal Form 1120 or Form 1120A, line 8	• 13		
	14 Contributions	• 14		
	15 EZ, LAMBRA, or TTA business expense and net interest deduction	• 15		
	16 Other deductions. Attach schedule(s)	• 16		
	17 Total. Add line 10 through line 16	• 17		
18 Net income (loss) after state adjustments. Subtract line 17 from line 9. See instructions	• 18	-264,451		
19 Net income (loss) for state purposes. Complete Sch. R if apportioning income. See instructions	• 19	-264,451		
CA Net Income	20 Net operating loss (NOL) carryover deduction. See instructions	• 20		
	21 Pierce's disease, EZ, LARZ, TTA, or LAMBRA NOL carryover deduction. See instructions	• 21		
	22 Disaster loss carryover deduction. See Instructions	• 22		
	23 Net income for tax purposes. Combine line 20 through line 22, then subtract from line 19	• 23	-264,451	
	24 Tax. $.834\% \times$ line 23 (not less than minimum franchise tax, if applicable)	• 24	800	
Taxes	25 Enter credit name _____ code no. _____ and amount	► 25		
	26 Enter credit name _____ code no. _____ and amount	► 26		
	27 To claim more than two credits, see Instructions	► 27		
28 Add line 25 through line 27	► 28			
29 BALANCE. Subtract line 28 from line 24 (not less than minimum franchise tax, if applicable)	► 29	800		
30 Alternative minimum tax. Attach Schedule P (100). See instructions	► 30			
31 TOTAL TAX. Add line 29 and line 30	► 31	800		
Payments	32 Overpayment from prior year allowed as a credit	► 32		
	33 2001 estimated tax payments. See Instructions	► 33	800	
	34 2001 Nonresident Withholding. See Instructions	► 34		
	35 Amount paid with extension of time to file return	► 35		
36 Total payments. Add line 32 through line 35	► 36	800		
Refund- of DDR or Amount Due	37 TAX DUE. If line 31 is more than line 36, subtract line 36 from line 31. Go to line 41	► 37		
	38 OVERPAYMENT. If line 36 is more than line 31, subtract line 31 from line 36	► 38		
	39 Amount of line 38 to be credited to 2002 estimated tax	► 39		
	40 REFUND. Amount of line 38 to be refunded. Line 38 less line 39. See DDR instructions	► 40		
	a Fill in the account information to have the refund directly deposited. Routing number _____ b Type: Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> c Account Number _____ 41 a Penalties and interest. b <input type="checkbox"/> Check if estimate penalty computed using Exception B or C. See instructions 42 TOTAL AMOUNT DUE. Add line 37 and line 41. Pay with tax return	► 40a ► 40c ► 41a ► 42		

10001104013

Form 100 C1 2001 Side 1

Schedule D California Capital Gains and Losses

ULTIMATE MOTROLLER CORPORATION

95-4609867

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less.

Use additional sheet(s) if necessary.

(a) Kind of property and description (Example, 100 shares of Z Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain (loss) (d) less (e))
1					

2 Short-term capital gain from installment sales from form FTB 3805E, line 26 or line 37

2

3 Unused capital loss carryover from 2000

3

4 Net short-term capital gain (loss). Combine line 1 through line 3

4

Part II Long-Term Capital Gains and Losses - Assets held More Than One Year.

Use additional sheet(s) if necessary.

5					
6 Enter gain from Schedule D-1, line 9 and/or any capital gain distributions					6
7 Long-term capital gain from Installment sales from form FTB 3805E, line 26 or line 37					7
8 Net long-term capital gain (loss). Combine line 5 through line 7					8
9 Enter excess of net short-term capital gain (line 4) over net long-term capital loss (line 8)					9
10 Net capital gain. Enter excess of net long-term capital gain (line 8) over net short-term capital loss (line 4)					10
11 Total line 9 and line 10. Enter here and on Form 100, Side 1, line 5. NOTE: If losses exceed gains, carry forward losses to 2002					11

Schedule J Add-On Taxes and Recapture of Tax Credits. See Instructions.

1 UFO recapture due to S corporation election (IRC Sec. 1363(d) deferral): \$	1
2 Interest computed under the look-back method for completed long-term contracts (Attach form FTB 3834)	2
3 Interest on tax attributable to installment:	
a Sales of certain timeshares and residential lots	3a
b Method for nondealer installment obligations	3b
4 IRC Section 197(f)(9)(B)(ii) election	4
5 Credit recapture name: _____	5
6 Combine line 1 through line 5. Revise Side 1, line 37 or line 38, whichever applies, by this amount. Write "Schedule J" to the left of line 37 or line 38	6

Questions (continued from Side 1)

E Principal business activity code. (Do not leave blank):	• 335310	• <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Business activity	MANUFACTURER	
Product or service	CONTROLLER & MOTROLLER	
F Date incorporated:	1/1/1997	• Where: State CA country USA
G Date business began in California or date income was first derived from California sources	1/1/1997	
H First return? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" and this corporation is a successor to a previously existing business, check the appropriate box: • (1) <input type="checkbox"/> sole prop. (2) <input type="checkbox"/> partnership (3) <input type="checkbox"/> joint venture (4) <input type="checkbox"/> corporation (5) <input type="checkbox"/> other (attach statement showing name, address and FEIN of previous business)		• <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I "Doing business as" name:		
J Did this corporation or its subsidiary(ies) have a change in control or ownership, or acquire ownership or control of any other legal entity this year? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
K At any time during the taxable year, was more than 50% of the voting stock: a Of the corporation owned by any single interest? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Of another corporation owned by this corporation? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No c Of this and one or more other corporations owned or controlled, directly or indirectly, by the same interest? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If a, b or c is "Yes," enter the country of the ultimate parent: _____		
M If a, b or c is "Yes," furnish a statement of ownership indicating pertinent names, addresses, and percentages of stock owned. If the owner(s) is an individual, provide this SSN.		
L Was 50% or more of the stock of this corporation owned by another corporation during this taxable year? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

U Is the corporation apportioned income to California using a formula? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
N How many affiliates in the combined report are claiming immunity from taxation in California under Public Law 86-272? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
O Corporation headquarters are: • (1) <input checked="" type="checkbox"/> Within California (2) <input type="checkbox"/> Outside of California, within the U.S. (3) <input type="checkbox"/> Outside of the U.S.
P Location of principal accounting records <input type="checkbox"/> VAN NUYS, CA
Q Accounting method: • (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other
R Did this corporation or one of its subsidiaries make a federal election to be treated as a foreign sales corporation (FSC) or a domestic international sales corporation (DISC)? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
S Is this corporation a RIC for California purposes? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
T Is this corporation treated as a REINC for California purposes? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
U Is this corporation a REIT for California purposes? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
V Is this corporation an LLC or limited partnership electing to be taxed as a corporation for federal purposes? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
W Is this corporation to be treated as a credit union? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
X Is the corporation under audit by the IRS or has it been audited by the IRS in a prior year? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Y Have all required information returns (e.g. Federal Forms 1099, 5471, 5472, 2300, etc., etc.) been filed with the Franchise Tax Board? <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No
Z During the taxable year, were gross receipts (less returns and allowances) of this corporation more than \$1 million? • <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				
Preparer's signature	Signature of officer ►	Title PRESIDENT	Date	Telephone (818)548-1106	
Preparer's signature		Date 9/11/2002	Check if self-employed ► <input checked="" type="checkbox"/>	Preparer's SSN/PTIN	
Paid Preparer's Use Only	Firm's name (or yours, if self-employed) and address ► ACE BUSINESS SERVICES 14422 VICTORY BLVD., VAN NUYS, CA 91401			FEIN	
				95-3896700	
				Telephone (818)994-7365	

Schedule A Taxes Deducted.		Use additional sheet(s) if necessary.	ULTIMATE MOTROLLER CORPORATION 95-4609867	
(a) Nature of tax	(b) Taxing authority	(c) Total amount	(d) Nondeductible amount	
CORPORATION INCOME TAX	FRANCHISE TAX BOARD	800.		
TOTAL Enter total of column (c) on Schedule E, line 17, and amounts in column (d) on Side 1, line 2 or line 3		800.		

Schedule F Computation of Net Income.		See Instructions.	
1 a) Gross receipts or gross sales	308,100.	b) Less returns and allowance	Balance
2 Cost of goods sold. Attach federal Schedule A (California Schedule V)			• 1c 308,100.
3 Gross profit. Subtract line 2 from line 1c			• 2 172,897.
4 Dividends. Attach federal Schedule C (California Schedule H)			• 3 135,203.
5 a Interest on obligations of the United States and U.S. Instrumentalities			• 4
b Other interest. Attach schedule			• 5a
6 Gross rents			• 5b
7 Gross royalties			• 6
8 Capital gain net income. Attach federal Schedule D (California Schedule D)			• 7
9 Ordinary gain (loss). Attach federal Form 4797 (California Schedule D-1)			• 8
10 Other income (loss). Attach schedule			• 9
11 TOTAL INCOME. Add line 3 through line 10			• 10
			• 11 135,203.
12 Compensation of officers. Attach federal schedule E or equivalent schedule			• 12
13 Salaries and wages (not deducted elsewhere)			• 13
14 Repairs		14	235.
15 Bad debts		• 15	
16 Rents		• 16	12,825.
17 Taxes (California Schedule A)		• 17	800.
18 Interest. Attach schedule		• 18	6,160.
19 Contributions. Attach schedule		• 19	
20 Depreciation. Attach federal Form 4562 and FTB 3885	20	23,135.	
21 Less depreciation claimed elsewhere on return	21a	• 21b 23,135.	
22 Depletion. Attach schedule		• 22	
23 Advertising		• 23	
24 Pension, profit-sharing, etc., plans		• 24	
25 Employees benefit plans		• 25	
26 a) Total travel and entertainment b) Deductible amounts		• 26b	
27 Other deductions. Attach schedule		• 27	379,834.
28 Specific deduction for 23701r or 23701t organizations. See Instructions		• 28	
29 TOTAL DEDUCTIONS. Add line 12 through line 28		• 29	422,989.
30 Net income before state adjustments. Subtract line 29 from line 11. Enter here and one Side 1, line 1		• 30	-287,786.

Schedule V Cost of Goods Sold

1 Inventory at beginning of year	1	
2 Purchases	2	
3 Cost of labor	3	
4 a Additional IRC Section 263A costs. Attach schedule	4a	
b Other costs. Attach schedule	4b	172,897.
5 Total. Add line 1 through line 4b	5	172,897.
6 Inventory at end of year	6	
7 Cost of goods sold. Subtract line 6 from line 5	7	172,897.

Method of inventory valuation ►

Was there any change in determining quantities, costs or valuations between opening and closing inventory? If "Yes," attach an explanation Yes No

Enter California seller's permit number, if any ►

Check if the LIFO inventory method was adopted this taxable year for any goods. If checked, attach federal Form 970

If the LIFO inventory method was used for this taxable year, enter the amount of closing inventory under LIFO

Do the rules of IRC Section 263A (with respect to property produced or acquired for resale) apply to the corporation? Yes No

ULTIMATE MOTROLLER CORPORATION		95-4609867	
Schedule L Balance Sheets		Beginning of taxable year	End of taxable year
Assets		(a)	(b)
1 Cash			8,967.
2 a Trade notes and accounts receivable			
b Less allowance for bad debts			
3 Inventories			
4 Federal and state government obligations			
5 Other current assets. Attach schedule(s)			
6 Loans to stockholders/officers. Attach schedule			
7 Mortgage and real estate loans			
8 Other Investments. Attach schedule(s)			
9 a Buildings and other fixed depreciable assets		163,968.	
b Less accumulated depreciation		(57,014.)	106,954.
10 a Depletable assets			
b Less accumulated depletion			
11 Land (net of any amortization)			
12 a Intangible assets (amortizable only)		1,000.	
b Less accumulated amortization		(800.)	200.
13 Other assets. Attach schedule(s)			
14 Total assets			117,221.
Liabilities and stockholders' equity			
15 Accounts payable			
16 Mortgages, notes, bonds payable in less than 1 year			
17 Other current liabilities. Attach schedule(s)			
18 Loans from stockholders			58,665.
19 Mortgages, notes, bonds payable in 1 year or more			519,642.
20 Other liabilities. Attach schedule(s)			240,000.
21 Capital stock: a Preferred stock			
b Common stock		2,500.	2,500.
22 Paid-in or capital surplus. Attach reconciliation			
23 Retained earnings - Appropriated. Attach schedule			
24 Retained earnings - Unappropriated			-703,486.
25 Adjustments to shareholders' equity (attach schedule)			
26 Less cost of treasury stock			
27 Total liabilities and stockholders' equity			117,221.
			89,523.

Schedule M-1 Reconciliation of income (loss) per books with income (loss) per return.

This schedule does not have to be completed if the amount on Schedule L, line 14, column (d), is less than \$25,000.

1 Net income per books	•	-287,786.	7 Income recorded on books this year not included in this return (itemize)	
2 Federal income tax	•		a Tax-exempt interest \$ _____	
3 Excess of capital losses over capital gains	•			
4 Taxable income not recorded on books this year (itemize)	•			
5 Expenses recorded on books this year not deducted in this return (itemize)			8 Deductions in this return not charged against book income this year (itemize)	
a Depreciation \$ _____			a Depreciation \$ _____	
b State taxes \$ _____			b State tax refunds \$ _____	
c Travel and entertainment \$ _____				
6 Total. Add line 1 through line 5		-287,786.	9 Total. Add line 7 and line 8	
			10 Net income per return. Subtract line 9 from line 6	-287,786.

Schedule M-2 Analysis of unappropriated retained earnings per books

(Schedule L, line 24)

This schedule does not have to be completed if the amount on Schedule L, line 14, column (d), is less than \$25,000.

1 Balance at beginning of year	•	-703,486.	5 Distributions: a Cash	•
2 Net income per books	•	-287,786.	b Stock	•
3 Other increases (itemize)			c Property	•
4 Total. Add line 1 through line 3		-991,272.	6 Other decreases (itemize):	
			7 Total. Add line 5 and line 6	
			8 Balance at end of year. Subtract line 7 from line 4	-991,272.

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

(Rev. March 2002)
Department of the Treasury
Internal Revenue Service (98)

OMB No. 1545-0172

2001

Attachment Seq. No.
67

See separate instructions. Attach to your tax return.

Name(s) shown on return ULTIMATE MOTROLLER CORPORATION	Business or activity to which this form relates MANUFACTURER	Identifying number 95-4609867
--	--	---

Part I Election To Expense Certain Tangible Property Under Section 179**Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount. See page 2 of the Instructions for a higher limit for certain businesses	1 24,000
2 Total cost of section 179 property placed in service (see page 3 of the instructions).	2 1,000
3 Threshold cost of section 179 property before reduction in limitation	3 200,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-.	4
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see page 3 of the instructions	5 24,000

(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
6			

7 Listed property. Enter the amount from line 29	7	
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9 Tentative deduction. Enter the smaller of line 5 or line 8	9	
10 Carryover of disallowed deduction from line 13 of your 2000 Form 4562.	10	
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13 Carryover of disallowed deduction to 2002. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation** (Do not include listed property.)

14 Special depreciation allowance for certain property (other than listed property) acquired after September 10, 2001 (see page 3 of the instructions)	14	
15 Property subject to section 168(i)(1) election (see page 4 of the instructions)	15	
16 Other depreciation (including ACRS) (see page 4 of the instructions)	16	

Part III MACRS Depreciation (Do not include listed property.) (See page 4 of the instructions.)

Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2001	17	22,404
18 If you are electing under section 168(i)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2001 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19 a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			27.5 yrs.	MM	S/L	
			39 yrs.	MM	S/L	
				MM	S/L	

Section C - Assets Placed in Service During 2001 Tax Year Using the Alternative Depreciation System

20 a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See page 6 of the instructions.)

21 Listed property. Enter amount from line 28	21	731
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	23,135

For Paperwork Reduction Act Notice, see separate instructions.

(HTA)

Form 4562 (2001) (Rev. 3-2002)

Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24e, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See page 8 of the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	24b If "Yes," is the evidence written?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ Investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for listed property acquired after September 10, 2001, and used more than 50% in a qualified business use (see page 7 of the instructions)						25		
26 Property used more than 50% in a qualified business use (see page 7 of the instructions)								
SEE ATTACHED SCH						731		
27 Property used 50% or less in a qualified business use (see page 7 of the instructions)								
						\$1-		
						\$1-		
						\$1-		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1						28	731	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1						29		

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles - see page 2 of the instructions) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?	(a) Vehicle 1	(b) Vehicle 2	(c) Vehicle 3	(d) Vehicle 4	(e) Vehicle 5	(f) Vehicle 6	
		Yes	No	Yes	No	Yes	No

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see page 8 of the instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See page 8 of the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? (See page 9 of the instructions.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begin during your 2001 tax year (see pg. 9 of the instructions)					
43 Amortization of costs that began before your 2001 tax year					
				43	200
44 Total. Add amounts in column (f). See page 9 of the instructions for where to report					
				44	200

Depreciation Report For 4562

ULTIMATE MOTRROLLER CORPORATION

Tax Year: 12/31/01

Item No.	Description of Property	Date Placed in Service	Cost or Other Basis	Code	Bus. Use %	Sec. 179 Deduction	Less Sec. 179 Allowance	30% Special Allowance	Recovery Period (years)	Method	Convention Code	Prior Accum. Deprec.	2001 Current Deprec.	Prior Accum. Deprec.	2001 Current Deprec.	Accum. Deprec.	
<hr/>																	
10	OFFICE EQUIPMENT	1/2/1997	2,300	B	100%				2,300	7	100%	1,151	329	1,480			
8	EQUIPMENT	4/8/1997	4,312	D	100%				4,312	7	100%	2,156	616	2,772			
1	OFFICE EQUIPMENTS	10/21/1998	12,860	B	100%				12,860	7	100%	2,711	1,807	4,518			
7	EQUIPMENT	8/20/1998	24,562	D	100%				24,562	7	100%	8,772	3,509	12,281			
5	EQUIPMENT	11/5/1998	28,000	D	100%				28,000	7	100%	10,000	4,000	14,000			
6	EQUIPMENT	9/2/1998	31,000	D	100%				31,000	7	100%	11,072	4,439	15,501			
4	EQUIPMENT	11/25/1998	54,000	D	100%				54,000	7	100%	19,466	7,714	27,179			
			<u>156,824</u>						<u>156,824</u>			<u>55,327</u>	<u>22,404</u>	<u>77,731</u>			
<hr/>																	
Listed property with more than 50% business use (Line 26)																	
2	COMPUTER	5/11/2001	1,000	L	100%				1,000	5	100%		100	100			
3	COMPUTER	7/30/1998	1,307	L	100%				1,307	5	100%	392	261	653			
9	COMPUTER	1/5/1997	1,850	L	100%				1,850	5	100%	1,295	370	1,665			
			<u>4,157</u>						<u>4,157</u>			<u>1,687</u>	<u>731</u>	<u>2,418</u>			
<hr/>																	
Amortization before current tax year (Line 43)																	
11	ORGANIZATION COST	12/20/1996	1,000	Z	100%				1,000	5	100%		800	200	1,000		
			<u>1,000</u>						<u>1,000</u>			<u>800</u>	<u>200</u>	<u>1,000</u>			
	Totals:		<u>161,981</u>						<u>161,981</u>			<u>57,814</u>	<u>23,335</u>	<u>81,149</u>			

95-4609867

TAXABLE YEAR

CALIFORNIA FORM

2001**Corporation Depreciation and Amortization****3885**

Attach to Form 100 or Form 100W.

Corporation name

ULTIMATE MOTROLLER CORPORATION

California corporation number
1793793**Part I Depreciation**

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Depreciation allowed or allowable in earlier years	(e) Method of figuring depreciation	(f) Life or rate	(g) Depreciation for this year	(h) Additional first year depreciation
1							
2 Add the amounts in column (g) and column (h). The combined total of column (h) may not exceed \$2,000. See instructions for line 1, column (h)						2	
3 Total. Add the amounts on line 2, column (g) and column (h)						3	
4 Total depreciation claimed for federal purposes from federal Form 4562, line 22						4	23,135,
5 Depreciation adjustment. If line 4 is greater than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 4 is less than line 3, enter the difference here and on Form 100 or Form 100W, Side 1, line 12. (If California depreciation amounts are used to determine net income before state adjustments on Form 100 or Form 100W, no adjustment is necessary.)						5	23,135.

Part II Amortization

(a) Description of property	(b) Date acquired	(c) Cost or other basis	(d) Amortization allowed or allowable in earlier years	(e) R&TC section	(f) Period or percentage	(g) Amortization for this year
1						
2 Total. Add the amounts in column (g)						2
3 Total amortization claimed for federal purposes from federal Form 4562, line 44						3
4 Amortization adjustment. If line 3 is greater than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 6. If line 3 is less than line 2, enter the difference here and on Form 100 or Form 100W, Side 1, line 12						4
						200.

General Information

In general, California law conforms to the Internal Revenue Code (IRC) as of January 1, 1998. However, there are continuing differences between California and federal law. California has not conformed to most of the changes made to the IRC by the federal Internal Revenue Service Restructuring and Reform Act of 1988 (Public Law 105-206) and the Ticket to Work and Work Incentives Improvement Act of 1999 (Public Law 106-170). California has not conformed to any of the changes made by the Tax and Trade Relief Extension Act of 1998 (Public Law 105-277), the Miscellaneous Trade and Technical Corrections Act of 1989 (Public Law 106-36), the FSC Repeal and Extraterritorial Income Exclusion Act of 2001 (Public Law 106-619), the Consolidated Appropriations Act of 2001 (Public Law 106-554), and the Economic Growth and Tax Relief Reconciliation Act of 2001 (Public Law 107-18). For any taxable year beginning on or after January 1, 2000, California law does not conform

to federal law regarding the temporary suspension of income limitations on percentage depletion for production from marginal wells. The percentage depletion deduction may not exceed 65% of the taxpayer's taxable income and cannot exceed 100% of the net income derived from the oil or gas well property.

A Purpose

Use this form to figure California depreciation and amortization for corporations, and for partnerships and limited liability companies (LLCs) classified as corporations. S corporations must use Schedule B (100S). Individuals must use form FTB 3885A, Depreciation and Amortization - Individuals. Fiduciaries and exempt trusts must use form FTB 3885F, Depreciation and Amortization - Fiduciaries. Partnerships must use form FTB 3885P, Depreciation and Amortization - Partnerships. LLCs classified as partnerships must

use form FTB 3885L, Depreciation and Amortization - Limited Liability Companies.

Depreciation and amortization are deductions corporations claim for reasonable exhaustion, wear and tear, and normal obsolescence of property used in a trade or business or held for the production of income.

For purposes of this form, depreciation is used in connection with tangible property, while amortization is used for intangible assets.

NOTE: For amortizing the cost of certified pollution control facilities, use form FTB 3880, Application to Amortize Certified Pollution Control Facility.

Important differences between federal and California laws affect the calculation of depreciation and amortization. Some of the major differences are briefly described, as follows:

- California law allows additional first-year depreciation under Revenue and Taxation Code

388501104013

FTB 3885 2001

Line 26 (Form 1120) - Other Deductions

1	From Form 4562 - Amortization	1	200
2	Travel, Meals and Entertainment	2a	2,538
3	a Travel	3	1,975
4	b Auto	4	6,538
5	c Bank charges	5	2,000
6	d Consultation expenses	6	3,417
7	e Delivery	7	264,317
8	f Equipment rent	8	589
9	g Insurance	9	505
10	h Miscellaneous	10	1,210
11	i Office supplies and expense	11	11,805
12	j Professional fees	12	335
13	k Security	13	3,311
14	l Telephone	14	1,094
15	m Utilities	15	80,000
16	Total other deductions	16	379,834

Line 5, Sch A (Form 1120) - Other Costs for Cost of Goods Sold

1	Travel, Meals and Entertainment	1a	
2	a Travel	1b	
3	b Total meals and entertainment	1c	
4	c 50% of line b	1d	
5	d Subtract line c from line b	2	
6	Depreciation	3	
7	Officer's compensation	4	15,870
8	PARTS	5	157,027
9	OUTSIDE ORDER	6	
10	7	
11	8	
12	9	
13	10	
14	11	
15	Total other costs	12	
		13	
		14	
		15	172,897

Line 14, Sch L (Form 1120) - Other Assets

		Beginning	End
1	SECURITY DEPOSIT FOR RENT	1	700
2	SECURITY DEPOSIT FOR DWP	2	400
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
11	Total other assets		1,100
			1,100

Line 18, Sch L (Form 1120) - Other Current Liabilities

	Beginning	End
1 SHORT-TERM BORROWINGS	1	58,565
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
11 Total other current liabilities	58,565	

Line 21, Sch L (Form 1120) - Other Liabilities

	Beginning	End
1 LINE OF CREDIT	1	100,000
2 LONG-TERM BORROWINGS	2	140,000
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9	
10	10	
11 Total other liabilities	240,000	540,748

Form 941 (1)
 (Rev. January 2002)
 Department of the Treasury
 Internal Revenue Service

Employer's Quarterly Federal Tax Return

► See separate instructions revised January 2002 for information on completing this return.
 PF 95-4609867 Please type or print.

Enter state code for state in which deposits were made only if different from state in address to the right ► (see page 2 of instructions).

OMB No. 1545-0029

T
FF
FD
FP
I
T

MAR2002 S29 CT
 ULTIMATE MOTROLLER CORPORATION 11277
 21352 NORDHOFF ST STE 108
 CHATSWORTH CA 91311-6908
~~Address in bold letters~~

If address is different from prior return, check here ►

1	1	1	1	1	1	1	1	1	2	3	3	3	3	3	3	4	4	4	5	5	5	
6	7	8	8	8	8	8	8	8	9	9	9	9	9	9	10	10	10	10	10	10	10	10

If you do not have to file returns in the future, check here ► and enter date final wages paid ► *7/30/02*
 If you are a seasonal employer, see Seasonal employers on page 1 of the instructions and check here ►

- 1 Number of employees in the pay period that includes March 12th ► **1**
- 2 Total wages and tips, plus other compensation
- 3 Total Income tax withheld from wages, tips, and sick pay
- 4 Adjustment of withheld income tax for preceding quarters of calendar year
- 5 Adjusted total of Income tax withheld (line 3 as adjusted by line 4—see instructions)
- 6 Taxable social security wages **6a** × 12.4% (.124) =
- 7 Taxable social security tips **6c** × 12.4% (.124) =
- 8 Taxable Medicare wages and tips **7a** × 2.9% (.029) =
- 9 Adjustment of social security and Medicare taxes (see instructions for required explanation)
 Sick Pay \$ ± Fractions of Cents \$ ± Other \$ =
- 10 Adjusted total of social security and Medicare taxes (line 8 as adjusted by line 9—see instructions)
- 11 Total taxes (add lines 5 and 10)
- 12 Advance earned income credit (EIC) payments made to employees
- 13 Net taxes (subtract line 12 from line 11). If \$2,500 or more, this must equal line 17, column (d) below (or line D of Schedule B (Form 941))
- 14 Total deposits for quarter, including overpayment applied from a prior quarter
- 15 Balance due (subtract line 14 from line 13). See instructions
- 16 Overpayment. If line 14 is more than line 13, enter excess here ► \$ and check if to be: Applied to next return or Refunded.
- All filers: If line 13 is less than \$2,500, you need not complete line 17 or Schedule B (Form 941).
- Semiweekly schedule depositors: Complete Schedule B (Form 941) and check here ►
- Monthly schedule depositors: Complete line 17, columns (a) through (d), and check here ►

17 Monthly Summary of Federal Tax Liability. Do not complete if you were a semiweekly schedule depositor.			
(a) First month liability	(b) Second month liability	(c) Third month liability	(d) Total liability for quarter

Third Party Designee	Do you want to allow another person to discuss this return with the IRS (see separate instructions)?	<input type="checkbox"/> Yes. Complete the following. <input type="checkbox"/> No
	Designee's name ►	Phone no. ► () Personal identification number (PIN) ► <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.	Print Your Name and Title ► <i>CARMY T. DO ACCOUNTANT</i>
	Signature ►	Date ► <i>7/30/02</i>

For Privacy Act and Paperwork Reduction Act Notice, back of Payment Voucher.

Cat. No. 17001Z

Form 941 (Rev. 1-2002)

Do Not Staple

6969

Form **1096**
Department of the Treasury
Internal Revenue Service

Annual Summary and Transmittal of U.S. Information Returns

OMB No. 1545-0108

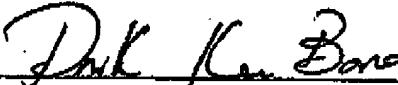
2003

FILER'S name ULTIMATE MOTROLLER CORPORATION															
Street address (including room or suite number) 4301 E., VALLEY BLVD. #C-4															
City, state, and ZIP code LOS ANGELES CA 90032															
Name of person to contact KI B. PARK		Telephone number (323) 224-0010		For Official Use Only											
E-mail address		Fax number ()													
1 Employer identification number 95-4609867	2 Social security number	3 Total number of forms 2	4 Federal income tax withheld \$ 0.00	5 Total amount reported with this Form 1096 \$ 29300.00											
Enter an "X" in only one box below to indicate the type of form being filed.												If this is your final return, enter an "X" here.			
<input type="checkbox"/> W-2G 32	<input type="checkbox"/> 1098 91	<input type="checkbox"/> 1098-E 84	<input type="checkbox"/> 1098-T 83	<input type="checkbox"/> 1099-A 80	<input type="checkbox"/> 1099-B 79	<input type="checkbox"/> 1099-C 85	<input type="checkbox"/> 1099-CAP 73	<input type="checkbox"/> 1099-DIV 91	<input type="checkbox"/> 1099-G 86	<input type="checkbox"/> 1099-H 71	<input type="checkbox"/> 1099-INT 92	<input type="checkbox"/> 1099-LTC 93	<input type="checkbox"/> 1099-MISC 95	<input checked="" type="checkbox"/>	
<input type="checkbox"/> 1099-MSA 94	<input type="checkbox"/> 1099-OID 96	<input type="checkbox"/> 1099-PATR 97	<input type="checkbox"/> 1099-Q 31	<input type="checkbox"/> 1099-R 98	<input type="checkbox"/> 1099-S 78	<input type="checkbox"/> 5498 28	<input type="checkbox"/> 5498-ESA 72	<input type="checkbox"/> 5498-MSA 77							

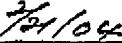
Return this entire page to the Internal Revenue Service. Photocopies are not acceptable.

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

Signature ►



Title ►

PRESIDENTDate ► 

Instructions

Purpose of form. Use this form to transmit paper Forms 1099, 1098, 5498, and W-2G to the Internal Revenue Service. Do not use Form 1096 to transmit electronically or magnetically. For magnetic media, see Form 4804, Transmission of Information Returns Reported Magnetically; for electronic submissions, see Pub. 1220, Specifications for Filing Forms 1098, 1099, 5498 and W-2G Electronically or Magnetically.

Who must file. The name, address, and TIN of the filer on this form must be the same as those you enter in the upper left area of Forms 1099, 1098, 5498, or W-2G. A filer includes a payer; a recipient of mortgage interest payments (including points) or student loan interest; an educational institution; a broker; a barter exchange; a creditor; a person reporting real estate transactions; a trustee or issuer of any individual retirement arrangement; a Coverdell ESA, an Archer MSA (including a Medicare+Choice MSA); certain corporations; and a lender who acquires an interest in secured property or who has reason to know that the property has been abandoned.

Preaddressed Form 1096. If you received a preaddressed Form 1096 from the IRS with Package 1099, use it to transmit paper Forms 1099, 1098, 5498, and W-2G to the Internal Revenue Service. If any of the preprinted information is incorrect, make corrections on the form.

If you are not using a preaddressed form, enter the filer's name, address (including room, suite, or other unit number), and TIN in the spaces provided on the form.

When to file. File Form 1096 with Forms 1099, 1098, or W-2G by March 1, 2004. File Form 1096 with Forms 5498, 5498-ESA, and 5498-MSA by May 31, 2004.

Where To File

Send all information returns filed on paper with Form 1096 to the following:

If your principal business, office or agency, or legal residence in the case of an individual, is located in

Use the following Internal Revenue Service Center address

Alabama, Arizona, Florida, Georgia, Louisiana, Mississippi, New Mexico, North Carolina, Texas, Virginia

Austin, TX 73301

Arkansas, Connecticut, Delaware, Kentucky, Maine, Massachusetts, New Hampshire, New Jersey, New York, Ohio, Pennsylvania, Rhode Island, Vermont, West Virginia

Cincinnati, OH 45999

Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Oklahoma, South Carolina, South Dakota, Tennessee, Wisconsin

Kansas City, MO 64999

For more information and the Privacy Act and Paperwork Reduction Act Notice, see the 2003 General Instructions for Forms 1099, 1098, 5498, and W-2G.

77-0564162

Form 1096 (2003)

9595 VOID CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Rents \$	OMB No. 1545-0115	2003 Form 1099-MISC	Miscellaneous Income
ULTIMATE MOTROLLER CORPORATION 4301 E. VALLEY BLVD. #C-4 LOS ANGELES CA 90032 (323) 224-0010		2 Royalties \$			
		3 Other income \$			
PAYER'S Federal identification number	RECIPIENT'S identification number	4 Federal income tax withheld \$			Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2003 General Instructions for Forms 1099, 1098, 5498, and W-2G.
95-4609867	184-46-6823	5 Fishing boat proceeds \$			
RECIPIENT'S name JAE Y. LIM		6 Nonemployee compensation \$ 7500.00			
Street address (including apt. no.) 1134 SEVILLE PL.		7 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale ► <input type="checkbox"/> \$			
City, state, and ZIP code FULLERTON CA 92833		8 Substitute payments in lieu of dividends or interest \$			
Account number (optional)	2nd TIN no.	9 Crop insurance proceeds \$			
		10 Excess golden parachute payments \$			
15		11 Gross proceeds paid to an attorney \$			
		12 State tax withheld \$			
		13 State/Payer's state no. \$			
		14 State income \$			

Form 1099-MISC

77-0564162

Department of the Treasury - Internal Revenue Service

Do Not Cut or Separate Forms on This Page

— Do Not Cut or Separate Forms on This Page

9595 VOID CORRECTED

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Rents \$	OMB No. 1545-0115	2003 Form 1099-MISC	Miscellaneous Income
ULTIMATE MOTROLLER CORPORATION 4301 E. VALLEY BLVD. #C-4 LOS ANGELES CA 90032 (323) 224-0010		2 Royalties \$			
		3 Other income \$			
PAYER'S Federal identification number	RECIPIENT'S identification number	4 Federal income tax withheld \$			Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2003 General Instructions for Forms 1099, 1098, 5498, and W-2G.
95-4609867	610-30-2576	5 Fishing boat proceeds \$			
RECIPIENT'S name KI B. PARK		6 Medical and health care payments \$			
Street address (including apt. no.) 23244 VANOWEN ST.		7 Nonemployee compensation \$ 21800.00			
City, state, and ZIP code WEST HILLS CA 91307		8 Substitute payments in lieu of dividends or interest \$			
Account number (optional)	2nd TIN no.	9 Crop insurance proceeds \$			
		10 Excess golden parachute payments \$			
15		11 Gross proceeds paid to an attorney \$			
		12 State tax withheld \$			
		13 State/Payer's state no. \$			
		14 State income \$			
		15 State income \$			

Form 1099-MISC

77-0564162

Department of the Treasury - Internal Revenue Service

EXHIBIT I



California Secretary of State Debra Bowen

[Secretary of State](#)[Administration](#) [Elections](#) [Business Programs](#) [Political Reform](#) [Archives](#) [Registries](#)**Business Entities (BE)****Online Services**

- [Business Search](#)
- [Disclosure Search](#)
- [E-File Statements](#)
- [Processing Times](#)

Main Page**Service Options****Name Availability****Forms, Samples & Fees****Annual/Biennial Statements****Filing Tips****Information Requests**
(certificates, copies & status reports)**Service of Process****FAQs****Contact Information****Resources**

- [Business Resources](#)
- [Tax Information](#)
- [Starting A Business](#)
- [International Business Relations Program](#)

Customer Alert
(misleading business solicitations)**Business Entity Detail**

Data is updated weekly and is current as of Friday, August 26, 2011. It is not a complete or certified record of the entity.

Entity Name:	ULTIMATE MOTROLLER CORPORATION
Entity Number:	C1793793
Date Filed:	11/13/1996
Status:	SUSPENDED
Jurisdiction:	CALIFORNIA
Entity Address:	2975 WILSHIRE BLVD STE 416
Entity City, State, Zip:	LOS ANGELES CA 90010
Agent for Service of Process:	SANG MAN HAN
Agent Address:	2975 WILSHIRE BLVD STE 416
Agent City, State, Zip:	LOS ANGELES CA 90010

* Indicates the information is not contained in the California Secretary of State's database.

- If the status of the corporation is "Surrender," the agent for service of process is automatically revoked. Please refer to California Corporations Code [section 2114](#) for information relating to service upon corporations that have surrendered.
- For information on checking or reserving a name, refer to [Name Availability](#).
- For information on ordering certificates, copies of documents and/or status reports or to request a more extensive search, refer to [Information Requests](#).
- For help with searching an entity name, refer to [Search Tips](#).
- For descriptions of the various fields and status types, refer to [Field Descriptions and Status Definitions](#).

[Modify Search](#) [New Search](#) [Printer Friendly](#) [Back to Search Results](#)

[Privacy Statement](#) | [Free Document Readers](#)

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**State of California
Secretary of State**

CERTIFICATE OF STATUS

ENTITY NAME:

ULTIMATE MOTROLLER CORPORATION

FILE NUMBER: C1793793
FORMATION DATE: 11/13/1996
TYPE: DOMESTIC CORPORATION
JURISDICTION: CALIFORNIA
STATUS: SUSPENDED

I, DEBRA BOWEN, Secretary of State of the State of California,
hereby certify:

The records of this office indicate the California Franchise Tax Board suspended the entity's powers, rights and privileges on August 02, 2004, pursuant to the provisions of the California Revenue and Taxation Code, and the entity's powers, rights and privileges remain suspended.



IN WITNESS WHEREOF, I execute this certificate
and affix the Great Seal of the State of
California this day of November 08, 2010.

A handwritten signature in black ink, appearing to read "Debra Bowen".

**DEBRA BOWEN
Secretary of State**

I hereby certify that the foregoing
transcript of _____ page(s),
is a full, true and correct copy of the
original record in the custody of the
California Secretary of State's office.



NOV - 8 2010

Date: Nov - 8 2010

Debra Bowen
DEBRA BOWEN, Secretary of State



State of California **85**
Kevin Shelley
Secretary of State

STATEMENT OF INFORMATION
(Domestic Stock Corporation)

IMPORTANT - READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. CORPORATE NAME: (Please do not alter if name is preprinted.)

C 1793793

Ultimate Motroller Corporation
2975 Wilshire Blvd, #416
Los Angeles, CA 90010

03-338643

FILED

In the office of the Secretary of State
of the State of California

AUG 25 2003

Kevin Shelley
KEVIN SHELLY, SECRETARY OF STATE

EC

This Space For Filing Use Only

2. CHECK HERE IF THE CORPORATION IS PUBLICLY TRADED. IF PUBLICLY TRADED, COMPLETE THIS STATEMENT OF INFORMATION AND THE CORPORATE DISCLOSURE STATEMENT (FORM SI-PTSUPP), SEE ITEM 2 OF INSTRUCTIONS.

NO CHANGE STATEMENT

3. IF THERE HAS BEEN NO CHANGE IN ANY OF THE INFORMATION CONTAINED IN THE LAST STATEMENT OF INFORMATION FILED WITH THE SECRETARY OF STATE, INCLUDING ANY INFORMATION CONTAINED IN FORM SI-PTSUPP, CHECK THE BOX AND PROCEED TO ITEM 17. IF THERE HAVE BEEN ANY CHANGES TO THE INFORMATION CONTAINED IN EITHER FORM, BOTH FORMS MUST BE COMPLETED IN THEIR ENTIRETY.

COMPLETE ADDRESSES FOR THE FOLLOWING (Do Not Abbreviate the Name of the City. Items 4 and 5 cannot be abbreviated)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE
2975 Wilshire Blvd #416 CITY AND STATE
CA 90010 ZIP CODE

5. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY
Same as above CITY STATE ZIP CODE
CA 90010

6. MAILING ADDRESS
Same as above CITY AND STATE ZIP CODE
CA 90010

NAMES AND COMPLETE ADDRESSES OF THE FOLLOWING OFFICERS (The corporation must have these officers. A corporation may have the specific offices may be added; however, please do not alter the preprinted title on this statement)

7. CHIEF EXECUTIVE OFFICER
Kibong Park ADDRESS CITY AND STATE
2975 Wilshire Blvd, #416 Los Angeles, CA 90010 ZIP CODE

8. SECRETARY
Kibong Park ADDRESS CITY AND STATE
2975 Wilshire Blvd, #416 Los Angeles, CA 90010 ZIP CODE

9. CHIEF FINANCIAL OFFICER
Kibong Park ADDRESS CITY AND STATE ZIP CODE
2975 Wilshire Blvd, #416 Los Angeles, CA 90010

NAMES AND COMPLETE ADDRESSES OF ALL DIRECTORS, INCLUDING DIRECTORS WHO ARE ALSO OFFICERS (Title or Position
have at least one director. Attach additional pages, if necessary.)

10. NAME
Sang Man Han ADDRESS CITY AND STATE ZIP CODE
2975 Wilshire Bl #416 Los Angeles, CA 90010

11. NAME
Sang Hwan Kei ADDRESS CITY AND STATE ZIP CODE
2975 Wilshire Bl #416 Los Angeles, CA 90010

12. NAME
Kibong Park ADDRESS CITY AND STATE ZIP CODE
2975 Wilshire Bl #416 Los Angeles, CA 90010

13. NAME
Kibong Park ADDRESS CITY AND STATE ZIP CODE
2975 Wilshire Bl #416 Los Angeles, CA 90010

NAME THE AGENT FOR SERVICE OF PROCESS (If an individual, the person named as agent must be a resident of California)

AN INDIVIDUAL RESIDING IN CALIFORNIA

A CORPORATION WHICH HAS FILED A CERTIFICATE PURSUANT TO CALIFORNIA CORPORATIONS CODE SECTION 1605.

AGENT'S NAME
Sang Man Han

14. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL
2975 Wilshire Blvd, #416 CITY
Los Angeles STATE
CA ZIP CODE
90010

15. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION
MANUFACTURER

16. THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT YES

Kibong Park
TYPE OR PRINT NAME OF OFFICER OR AGENT
Park Kibong SIGNATURE
CEO TITLE
5/14/03 DATE

SI-200 INC (REV 012003)

008-U 00/00 T-100

-100 J 57 TT BT -80 TT

EXHIBIT J

Ultimate Motroller Corporation

<Loans as of 11/18/2002>

Line of Credit

United California bank	\$ 36,000
Union Bank of California	\$ 50,000
MENA	\$ 50,000

Long Term

Mr. Sang Han	\$ 60,000
Mr. In Choi	\$ 42,500
Mr. Enrique Vella	\$ 90,000
Mr. Dow	\$ 15,000
Mr. Lim	\$ 67,200

Project Base

Mr. Ki Nam	\$ 80,000	EEV Project Advance
Mr. Na	\$100,000	NEV Project
Pragmatic Resources	\$100,000	NEV Project
Mr. Benjamin Kwon	\$100,000	

Leases	\$160,350
CEO Purchase of Patent	\$ 89,000
Total	<u>\$1,040,050</u>

EXHIBIT K

02-042383-CK

STATE OF MICHIGAN		JUDICIAL DISTRICT	SUMMONS AND COMPLAINT
6th	JUDICIAL CIRCUIT	COUNTY PROBATE	SECURED

Court address

1200 N. Telegraph Road, Pontiac, MI 48341

Plaintiff name(s), address(es), and telephone no(s).

Lease Acceptance Corporation, a division
of Federated Capital Corporation

c/o Plaintiff's Attorney

Plaintiff attorney, bar no., address, and telephone no.

Lawrence G. Reinbold (P43594)
30955 Northwestern Hwy.
Farmington Hills, MI 48334
(248) 737-2300 ext. 440

Defendant name(s), address(es), and telephone no(s).

Ultimate Motroller Corp.

7400 Melrose Ave.

Los Angeles, CA 90046

601 Via Wapak

Montebello, CA

90640

5555 Melrose Ave.

Los Angeles, CA 90046

1601 Via Wapak

Montebello, CA

90640

SUMMONS NOTICE TO THE DEFENDANT: In the name of the people of the State of Michigan you are notified:

1. You are being sued.
2. **YOU HAVE 21 DAYS** after receiving this summons to file an answer with the court and serve a copy on the other party or to take other lawful action (28 days if you were served by mail or you were served outside this state).
3. If you do not answer or take other action within the time allowed, judgment may be entered against you for the relief demanded in the complaint.

Issued

This summons expires

Court clerk

Karen Caddell

*This summons is invalid unless served on or before its expiration date.

10/15/02

COMPLAINT Instruction: The following is information that is required to be in the caption of every complaint and is to be completed by the plaintiff. Actual allegations and the claim for relief must be stated on additional complaint pages and attached to this form.

Family Division Cases

There is no other pending or resolved action within the jurisdiction of the family division of circuit court involving the family or family members of the parties.

An action within the jurisdiction of the family division of the circuit court involving the family or family members of the parties has been previously filed in _____ Court.

The action remains is no longer pending. The docket number and the judge assigned to the action are:

Docket no.	Judge	Bar no.
------------	-------	---------

General Civil Cases

There is no other pending or resolved civil action arising out of the same transaction or occurrence as alleged in the complaint.

A civil action between these parties or other parties arising out of the transaction or occurrence alleged in the complaint has been previously filed in _____ Court.

The action remains is no longer pending. The docket number and the judge assigned to the action are:

Docket no.	Judge	Bar no.
------------	-------	---------

VENUE

Plaintiff(s) residence (include city, township, or village)

Farmington Hills, MI

Place where action arose or business conducted

Farmington Hills, MI

Defendant(s) residence (include city, township, or village)

Los Angeles, CA

10/14/02

Date

(P43594)

Signature of attorney/plaintiff Lawrence G. Reinbold

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you to fully participate in court proceedings, please contact the court immediately to make arrangements.

MC 01 (3m2) **SUMMONS AND COMPLAINT** MCR 2.102(B)(1), MCR 2.104, MCR 2.105, MCR 2.107, MCR 2.113(C)(2)(a), (b); MCR 3.208(A)

COPY**ORIGINAL**ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):
 Recording requested by and return to:

(213) 239-5519

FOR RECORDER'S USE ONLY

Alan W. Forsley SBN 180958
 HENRICH LAW FIRM, P.C.
 835 Wilshire Boulevard, Suite 300
 Los Angeles, California 90017

 ATTORNEY FOR JUDGMENT CREDITOR ASSIGNEE OF RECORD

NAME OF COURT: Los Angeles Superior Court
 STREET ADDRESS: 600 E. Broadway
 MAILING ADDRESS: 600 E. Broadway
 CITY AND ZIP CODE: Glendale, CA 91206
 BRANCH NAME: North Central District

PLAINTIFF: General Electric Capital Business Asset Funding Corporation
 DEFENDANT: Ultimate Motroller Corporation; Sang Man Han, an individual

WRIT OF	<input checked="" type="checkbox"/> EXECUTION (Money Judgment)
	<input type="checkbox"/> POSSESSION OF <input type="checkbox"/> Personal Property
	<input type="checkbox"/> Real Property
	<input type="checkbox"/> SALE

CASE NUMBER:
02C02568

FOR COURT USE ONLY

1. To the Sheriff or any Marshal or Constable of the County of Los Angeles
 You are directed to enforce the judgment described below with daily interest and your costs as provided by law.
2. To any registered process server: You are authorized to serve this writ only in accord with CCP 699.080 or CCP 715.040.
3. (Name): General Electric Capital Business Asset Funding Corporation is the Judgment creditor assignee of record whose address is shown on this form above the court's name.
4. Judgment debtor (name and last known address):

Ultimate Motroller Corporation
 a California corporation
 373 West Palmer St., Unit A
 Glendale, CA 91204

9. See reverse for information on real or personal property to be delivered under a writ of possession or sold under a writ of sale.

10. This writ is issued on a sister-state judgment.

11. Total Judgment \$ 24,199.38

12. Costs after Judgment (per filed order or memo CCP 685.090) \$ 0.00

13. Subtotal (add 11 and 12) \$ 24,199.38

14. Credits \$ 0.00

15. Subtotal (subtract 14 from 13) \$ 24,199.38

16. Interest after Judgment (per filed affidavit CCP 685.050) \$ 0.00

17. Fee for issuance of writ \$ 7.00

18. Total (add 15, 16, and 17) \$ 24,206.38

19. Levying officer:

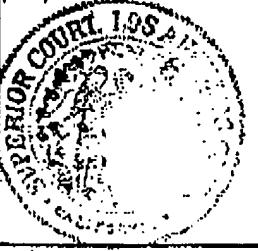
(a) Add daily interest from date of writ (at the legal rate on 15) of \$ 0.00

(b) Pay directly to court costs included in 11 and 17 (GC 6103.5, 68511.3; CCP 699.520(l)) \$ 0.00

20. The amounts called for in items 11-19 are different for each debtor. These amounts are stated for each debtor on Attachment 20.

- additional judgment debtors on reverse
 5. Judgment entered on (date): November 22, 2002
 6. Judgment renewed on (dates):
 7. Notice of sale under this writ
 a. has not been requested.
 b. has been requested (see reverse).
 8. Joint debtor information on reverse.

RESEAL



Issued on (date) DEC 18 2002

JOHN A. CLARKE

clerk, by M. KEELING-HILL, Deputy

M. KEELING-HILL

— NOTICE TO PERSON SERVED: SEE REVERSE FOR IMPORTANT INFORMATION —

Form Approved by the
 Judicial Council of California
 EJ-130 (Rev. January 1, 1997)
 Optional Form

WRIT OF EXECUTION

Legal
 Solutions
 & Plus

Code of Civil Procedure, §§ 699.520, 712.010, 715.010

*See note on reverse.

Page 1 of 2

WILD WEST RECOVERY

Phone: (714) 636-5251
Fax: (714) 636-2006
State License: RA 1236

P.O. Box 1151
Garden Grove CA 92842

Wild West Recovery

ORDER TO REPOSSESS - #0301042-1 - 01/09/03

REGISTERED OWNER:

EMPLOYMENT:

ULTIMATE MOTROLLER CORP,
21352 NORDOFF ST
CHATSWORTH, CA 91311,
(818) 548-1106
SS#:

COLLATERAL: 00 SHARP 7900 COLOR COPY PRINTER
COMPUTER NETWORK SYS /

KEYS:

BALANCE: 0.00 PAYMENT AMOUNT: 0.00 TOTAL PAYMENTS DUE: 0.00
LAST PAID: NEXT DUE:

DELIVER TO:,

INSTRUCTIONS/INFO > Contact & Collect Current ONLY
THIS IS FOR CONTACT AND COLLECT ONLY, PAST DUE BALANCE TO COLLECT IS
\$5826.78 IN CERTIFIED FUNDS. DAVID CHOI PG NUMBER IS 818-548-1107
JAY LIMO PG IS 213-738-9721. HOME ADD 1601 VIA NAIPOLI, MONTEBELLO

CLIENT: ASSET CONTROL CORPORATION Phone: (888) 227-0444
40 WESTMINSTER ST 4TH FLOOR Ext:
PROVIDENCE RI 02903 Acct. #: 011849-20-01

This is your authorization to act as our agents to collect or reposess, on sight, the above listed collateral which is covered by a defaulted contract. We agree to indemnify and save WILD WEST RECOVERY and agents or employees of WILD WEST RECOVERY harmless from and against any and all claims, including court costs, reasonable attorney fees and other expenses of litigation, except unauthorized acts of your firm.

Authorized By: TARA WILLIS, ASSET CONTROL CORPORATION

DATE SERV'D: ____/____/____ TIME: ____ : ____ AM/PM TIME PHONED: ____ : ____ AM/PM LAW ENFORCEMENT AGENCY: _____

PHONE: _____ CASE NUMBER: _____ OFFICER'S NAME & BADGE: _____ COLOR: _____

TAGS: ____ / ____ DOORS: ____ Cyl: ____ COND: ____ MILEAGE: _____ IGN: PICKED ____ PULLED ____ KEYS ____

(Flt: WN69 /Acc: FAX /Ext: WN03



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NOTE: Results display only for issued patents and published applications.
For pending or abandoned applications please consult USPTO staff.

Total Assignments: 3

Patent #: 5359401 Issue Dt: 03/19/2002 Application #: 0969061.3 Filing Dt: 10/16/2000

Inventors: Neil Garcia-Sinclair, KI BONG PARK

Title: Multi-phase bipolar brushless D.C. motor

Assignment: 1

Reel/Frame: 011239/0599 Recorded: 10/16/2000 Pages: 5

Conveyance: ASSIGNMENT OF ASSIGNORS INTEREST (SEE DOCUMENT FOR DETAILS).

Assignor: GARCIA-SINCLAIR, NEIL
 PARK, KI BONG
 Assignee: ULTIMATE MOTROLLER CORPORATION
 #108
 21352 NORDHOFF STREET
 CHATSWORTH, CALIFORNIA 91311

Exec Dt: 10/11/2000
 Exec Dt: 10/11/2000

Correspondent: KELLY BAUERSFELD ET AL

SCOTT W. KELLEY
 6320 CANOGA AVENUE
 SUITE 1650
 WOODLAND HILLS, CALIFORNIA 91367

Assignment: 2

Reel/Frame: 013735/0842 Recorded: 02/06/2003 Pages: 3

Conveyance: SECURITY AGREEMENT

Exec Dt: 07/22/2002

Assignor: ULTIMATE MOTROLLER CORPORATION
 Assignee: ERNST E. DOW
 3435 WILSHIRE BLVD. #1700
 LOS ANGELES, CALIFORNIA 90010

Correspondent: ERNST E. DOW

3435 WILSHIRE BLVD., #1700
 LOS ANGELES, CA 90010

Assignment: 3

Reel/Frame: 025364/0377 Recorded: 11/15/2010 Pages: 3

Conveyance: ASSIGNMENT OF ASSIGNORS INTEREST (SEE DOCUMENT FOR DETAILS).

Exec Dt: 11/10/2010

Assignor: ULTIMATE MOTROLLER CORPORATION
 Assignee: CYCLONATIX, INC.
 4301 E. VALLEY BLVD.
 LOS ANGELES, CALIFORNIA 90032

Correspondent: JOHN K. PARK

3255 WILSHIRE BLVD., SUITE 1110
 LOS ANGELES, CA 90010

If you have any comments or questions concerning the data displayed, contact PRD / Assignments at 571-272-3350, v.2.2
 Web Interface last modified: July 26, 2011 v.2.2

[HOME](#) | [INDEX](#) | [SEARCH](#) | [eBUSINESS](#) | [CONTACT US](#) | [PRIVACY STATEMENT](#)

ATTORNEY (Name, state bar number, and address): SUSAN KAY BREEN, ESQ. (156509) HEMAR, ROUSSO & HEALD, LLP 15910 VENTURA BLVD., 12TH FLOOR ENCINO, CA 91436 TELEPHONE NO.: (818) 501-3800 FAX NO.: (818) 501-2985		POR COURT USE ONLY
ATTORNEY FOR (name): UNION BANK OF CALIFORNIA Insert name of court and name of judicial district and branch court, if any: SUPERIOR COURT OF THE STATE OF CALIFORNIA LOS ANGELES, CA 90012		
PLAINTIFF: UNION BANK OF CALIFORNIA, N.A.		
DEFENDANT: ULTIMATE MOTROLLER CORPORATION, a California corporation, aka ULTIMATE MOTROLLER CORP.;		
REQUEST FOR <input checked="" type="checkbox"/> ENTRY OF DEFAULT <input type="checkbox"/> CLERK'S JUDGMENT (Application) <input type="checkbox"/> COURT JUDGMENT		CASE NUMBER: BC290359

1. TO THE CLERK: On the complaint or cross-complaint filed
- on (date): 2/13/03
 - by (name): UNION BANK OF CALIFORNIA, N.A.,
 - Enter default of defendant (names): ULTIMATE MOTROLLER CORPORATION, a California corporation, aka ULTIMATE MOTROLLER CORP.
 - I request a court judgment under Code of Civil Procedure sections 585(b), (c), 989, etc. (Testimony required. Apply to the clerk for a hearing date, unless the court will enter a judgment on an affidavit under Code of Civil Procedure section 585(d).)
 - Enter clerk's judgment
 - for restitution of the premises only and issue a writ of execution on the judgment. Code of Civil Procedure section 1174(c) does not apply. (Code Civ. Proc. § 1169.)
 Include in the judgment all tenants, subtenants, named claimants, and other occupants of the premises. The Prejudgment Claim of Right to Possession was served in compliance with Code of Civil Procedure section 415.46.
 - under Code of Civil Procedure section 585(a). (Complete the declaration under Code Civ. Proc., § 585.5 on the reverse (item 5).)
 - for default previously entered on (date):

2. Judgment to be entered	Amount	Credits acknowledged	Balance
a. Demand of complaint	\$ FOR DEFAULT	\$ PURPOSES ONLY	\$
b. Statement of damages*	\$	\$	\$
(1) Special	\$	\$	\$
(2) General	\$	\$	\$
c. Interest	\$	\$	\$
d. Costs (see reverse)	\$	\$	\$
e. Attorney fees	\$	\$	\$
f. TOTALS	\$	\$	\$

- g. Daily damages were demanded in complaint at the rate of: \$ 0.00 per day beginning (date):
(*Personal injury or wrongful death actions only in non-limited civil cases; Code Civ. Proc., § 425.11)
3. (Check if filed in an unlawful detainer case) LEGAL DOCUMENT ASSISTANT OR UNLAWFUL DETAINER ASSISTANT Information is on the reverse (complete item 4).

Date: May 20, 2003

SUSAN KAY BREEN, ESQ.
(TYPE OR PRINT NAME)

(SIGNATURE OF PLAINTIFF OR ATTORNEY FOR PLAINTIFF)

- FOR COURT USE ONLY
(1) Default entered as requested on (date):
(2) Default NOT entered as requested (state reason):

Clerk, by: _____ Deputy _____

Best Available Copy

JUD-100

FOR COURT USE ONLY

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address)

MARTINA A. RIDER/SBN: 174795

MARTINA A. RIDER
HEMAR, ROUSSO & HEALD, LLP
15910 Ventura Boulevard, 12th Floor
Encino, CA 91436

TELEPHONE NO (818) 501-3800 FAX NO (Optional)

E-MAIL ADDRESS (Optional)

ATTORNEY FOR (Name)

SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES

STREET ADDRESS 111 North Hill Street

MAILING ADDRESS:

CITY AND ZIP CODE: Los Angeles, CA 90012

BRANCH NAME: CENTRAL DISTRICT

PLAINTIFF: IMPERIAL BUSINESS CREDIT, INC., a corporation

DEFENDANT: ULTIMATE MORTROLLER CORPORATION aka ULTIMATE MORTROLLER C

JUDGMENT	<input checked="" type="checkbox"/> By Clerk <input checked="" type="checkbox"/> By Default <input checked="" type="checkbox"/> By Court <input type="checkbox"/> On Stipulation
----------	---

<input type="checkbox"/>	After Court Trial
<input type="checkbox"/>	Defendant Did Not Appear at Trial

CASE NUMBER:

BC292689

① Signature
 ② CEO
 ③ Payment Arrangements

1. BY DEFAULT

- a. Defendant was properly served with a copy of the summons and complaint.
- b. Defendant failed to answer the complaint or appear and defend the action within the time allowed by law.
- c. Defendant's default was entered by the clerk upon plaintiff's application.
- d. Clerk's Judgment (Code Civ. Proc., § 585(a)). Defendant was sued only on a contract or judgment of a court of this state for the recovery of money.
- e. Court Judgment (Code Civ. Proc., § 585(b)). The court considered
 - (1) Plaintiff's testimony and other evidence.
 - (2) Plaintiff's written declaration (Code Civ. Proc., § 585(d)).

2. ON STIPULATION

- a. Plaintiff and defendant agreed (stipulated) that a judgment be entered in this case. The court approved the stipulated judgment and
- b. the signed written stipulation was filed in the case.
- c. the stipulation was stated in open court the stipulation was stated on the record.

3. AFTER COURT TRIAL. The jury was waived. The court considered the evidence.

- a. The case was tried on (date and time)
 before (name of judicial officer).

D. Appearances by:

 Plaintiff (name each):

(1)

(2)

 Plaintiff's attorney (name each):

(1)

(2)

 Continued on Attachment 3b. Defendant (name each):

(1)

(2)

 Defendant's attorney (name each):

(1)

(2)

 Continued on Attachment 3b.

- c. Defendant did not appear at trial. Defendant was properly served with notice of trial.

d. A statement of decision (Code Civ. Proc. § 632) was not requested.

3133.0133

982(a)(6)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): Stephen M. Spinella (SBN 144732) SOLOMON, GRINDLE, SILVERMAN & SPINELLA A Professional Corporation 12555 High Bluff Drive, Suite 260 San Diego, CA 92130 TELEPHONE NO.: (858) 793-8500 FAX NO.: ATTORNEY FOR (name): HELLER FINANCIAL LEASING, INC.		FOR COURT USE ONLY
Insert name of court and name of judicial district and branch court, if any: SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES CENTRAL DISTRICT		
PLAINTIFF: HELLER FINANCIAL LEASING, INC., a GE CAPITAL COMPANY, a Delaware corporation		
DEFENDANT: ULTIMATE MOTROLLER CORPORATION, a California corporation; DAVID I. CHOI, an individual		Heller Case
REQUEST FOR <input type="checkbox"/> ENTRY OF DEFAULT <input type="checkbox"/> CLERK'S JUDGMENT (Application) <input checked="" type="checkbox"/> COURT JUDGMENT		CASE NUMBER: BC 291435 (472)

1. TO THE CLERK: On the complaint or cross-complaint filed
 a. on (date): March 4, 2003
 b. by (name): HELLER FINANCIAL LEASING, INC., a GE CAPITAL COMPANY, a Delaware corporation
 c. Enter default of defendant (names):
- d. I request a court judgment under Code of Civil Procedure sections 585(b), (c), 988, etc., against defendant (names): ULTIMATE MOTROLLER CORPORATION, a California corporation; and DAVID I. CHOI, an individual
 (Testimony required. Apply to the clerk for a hearing date, unless the court will enter a judgment on an affidavit under Code of Civil Procedure section 585(d).)
- e. Enter clerk's judgment
 (1) for restitution of the premises only and issue a writ of execution on the judgment. Code of Civil Procedure section 1174(c) does not apply. (Code Civ. Proc., § 1169.)
 Include in the judgment all tenants, subtenants, named claimants, and other occupants of the premises. The Prejudgment Claim of Right to Possession was served in compliance with Code of Civil Procedure section 415.46.
 (2) under Code of Civil Procedure section 585(a). (Complete the declaration under Code Civ. Proc., § 585.5 on the reverse (item 5).)
 (3) for default previously entered on (date): 6/4/03 & 5/2/03, respectively
2. Judgment to be entered
- | | Amount | Credits acknowledged | Balance |
|------------------------------|---------------|----------------------|---------------|
| a. Demand of complaint | \$ 82,351.36 | \$ 129.15 | \$ 82,222.21 |
| b. Statement of damages | | | |
| (1) Special | \$ | \$ | \$ |
| (2) General | \$ | \$ | \$ |
| c. Interest | \$ 17,014.07 | \$ | \$ 17,014.07 |
| d. Costs (see reverse) | \$ 368.30 | \$ | \$ 368.30 |
| e. Attorney fees | \$ 2,534.44 | \$ | \$ 2,534.44 |
| f. TOTALS | \$ 102,268.17 | \$ 129.15 | \$ 102,139.02 |
- g. Daily damages were demanded in complaint at the rate of: \$ per day beginning (date):
 (* Personal injury or wrongful death actions; Code Civ. Proc., § 425.11)
3. (Check if filed in an unlawful detainer case) LEGAL DOCUMENT ASSISTANT OR UNLAWFUL DETAINER ASSISTANT
 Information is on the reverse (complete item 4).

Date: August 7, 2003

Stephen M. Spinella, Reg.
(TYPE OR PRINT NAME)

(SIGNATURE OF PLAINTIFF OR ATTORNEY FOR PLAINTIFF)

- FOR COURT USE ONLY
- (1) Default entered as requested on (date):
 (2) Default NOT entered as requested (state reason):

Clerk, by: _____ Deputy: _____

Form Adopted for Mandatory Use
Judicial Council of California
020408 (Rev. July 1, 2003)REQUEST FOR ENTRY OF DEFAULT
(Application to Enter Default)Legal
Solutions
LLC PlusPage 1 of 2
Code of Civil Procedure,
§§ 588-587, 1169

2158 W. 190TH STREET
TORRANCE, CA 90504-6103

RETURN SERVICE REQUESTED

May 13, 2004

ULTIMATE M CORPORATION
CQ 2065298
4301 E VALLEY BOULEVARD, #C-4
LOS ANGELES CA 90032-3632
~~XXXXXXXXXXXXXXXXXXXXXX~~

American Agencies

800-521-4956

RE: KELLY BAUSERFELD LOWRY & KELLY
Account Number: CQ 2065298
Principal Owed: \$8464.89
Interest: \$909.11
Pay This Amount: \$9374.00

(Patent Lawyer Fee)

American Agencies, an accounts receivable management firm, has been retained to help you resolve your unpaid account for \$9374.00 that was referred to us by our client. The purpose of this letter is to thank you for allowing our client to serve you, possibly re-establish that business relationship, and help maintain your current credit standing by satisfying this unpaid account.

Our firm would also like to ask you if there is any reason for you not paying this balance? Please call us at 800-521-4956 and advise us of when we can expect your payment or to let us know your position on this matter.

Please send all payments to American Agencies, not to our client. If you have made any payments, please deduct them from the above stated amount and send the remaining balance. If payment was sent directly to our client, please inform us in order to assure accurate credit reporting and follow up.

This has been sent to you by a debt collector or collection agency. This is an attempt to collect a debt and any information obtained will be used for that purpose.

NOTICE: SEE REVERSE SIDE FOR IMPORTANT INFORMATION.

Calls are randomly monitored and/or recorded for quality and training purposes.

We will not submit negative credit information to Experian and TransUnion credit-reporting agencies about this obligation until approximately 30 days after the date of this notice. Please do not delay. Contact us today.

Return this portion with your payment

Detach this payment coupon and return it with your payment in the envelope provided.

Make check or money order payable to: **American Agencies**. Do not send cash.

Please write your Account Number shown below on your payment.

Account Number: CQ 2065298

Pay This Amount: \$9374.00

American Agencies
CQ 2065298
P.O. Box 2829
Torrance, CA 90509-2829

From: _____

Phone: _____

Address: _____

Check here if new address or phone
Marque aquí si su dirección o teléfono cambió

AAG10X-512B200013-JCAQ-3-13

SEP 07 2011

 COPY

CONFORMED COPY

OF ORIGINAL FILED

Los Angeles Superior Court

JUN 11 2004

John A. Clarke, Executive Officer/Clerk

By _____ Deputy

SUE GABB

1 GREGORY W. SMITH (SBN 134385)
2 LAW OFFICES OF GREGORY W. SMITH
3 3435 Wilshire Boulevard, Suite 2920
Los Angeles, California 90010
Telephone: (213) 385-3400.
Telecopier: (213) 384-7110

5 Attorneys for Plaintiff
YOON CHA NA

SUPERIOR COURT OF THE STATE OF CALIFORNIA
FOR THE COUNTY OF LOS ANGELES

11 YOON CHA NA,

CASE NO. BC 316961

12 Plaintiff,

COMPLAINT FOR DAMAGES:

13 vs.
14 ULTIMATE MOTROLLER
CORPORATION; ERNEST E. DOW;
15 JAE LIM; KI BONG PARK; and DOES 1
through 20, inclusive,

1. BREACH OF CONTRACT;
2. MONEY LENT;
3. MONEY HAD AND RECEIVED

16 Defendants.

GENERAL ALLEGATIONS

20 1. Plaintiff YOON CHA NA is, and at all times herein mentioned was, a
residents of Los Angeles County, State of California.

22 2. Plaintiff is informed and believe and thereupon alleges that, at all times
herein mentioned, Defendant ULTIMATE MOTROLLER CORPORATION (hereinafter
"Defendants"), is and was a entity organized by virtue of the laws of the State of
25 California, authorized to conduct business in the County of Los Angeles, and was as a
matter of commercial actuality, in purposeful economic activity, within the County of Los
26 Angeles, State of California.

28 3. Plaintiff is informed and believes and thereupon alleges that, at all times

E:\ANGSINA\Yoon\Complaint.wpd

1

COMPLAINT FOR DAMAGES

500

CHARTO

17:11 FAX 823 227 8881
08/28/10